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COMMISSIONER FOR PATENTS
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Bib Data Sheet

SERIAL NUMBER 09/621,894	FILING DATE 07/20/2000 RULE -	CLASS 370	GROUP ART UNIT 2731	ATTORNEY DOCKET NO. MOT-D2149	
APPLICANTS Raymond Bontempi, Jamison, PA ;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/27/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no		STATE OR COUNTRY PA	SHEETS DRAWING 5	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged		Examiner's Signature		Initials	
ADDRESS 24375					
TITLE Reservation/retry media access control					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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PK
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CONFIRMATION NO. 4648

SERIAL NUMBER 09/621,894	FILING DATE 07/20/2000 RULE	CLASS 370	GROUP ART UNIT 2664	ATTORNEY DOCKET NO. MOT-D2149	
APPLICANTS Raymond Bontempi, Jamison, PA;					
** CONTINUING DATA ***** None D212					
** FOREIGN APPLICATIONS ***** None D212					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/27/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Daniel R. Rana</u> <u>doi?</u> Examiner's Signature Initials		STATE OR COUNTRY PA	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS 24375					
TITLE 09621894Reservation/retry media access control					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		